15/5/2010

INS. CASE OWNER: Yvonne | CC 4/~~AXA~~ ASM 1901 4126 , K h ~~663~~ | LKK: IDAC:

ASSIGNMENT

Surveyor: KENNETH   DOI: 16/08/19   Date / Time : 14/8/19.

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. :	SFX 66M.	Claim No. :	S9M01WRG / 131151
Name of Insured :	HEE THIAM SOON	Policy No. :	GA 137115F
Insured Tel No. :	HP:	Make / Model :	HONDA
Excess Sec II :S$	D.O.A : 12/8/19.	Place of Accident :	JB CUSTOM (TUAS)
Is driver the owner? (YES / NO)	Nature of Accident :		

If **NO**, Driver Name / Age :   OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. :   (V/L: YES / NO)   Insured Liability : %   **Final ? Yes / No**

SLF 493L → → →

INSRS: WSP: BH Auto. Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:	INSRS: WSP: Tel : Liability : RMKS:

Date/ Time	
	SLF 4932 - T
	SFX 66M - CS/ASM19001449/Eod 335 DMT: 21/8/19
27/8/19	Confirm accident details letter and call
	- TP LOD IN BY EMAIL
19/02/2020	- UPLOADED MANDATE IA IN SC
21/02/2020	- AXA APPROVED MANDATE
25/02/2020	- SEND 1ST OFFER TO TP
27/02/2020	- TP ACCEPTED OFFER
	- ALL DOCS IN ORDER
	- TO CLOSE

STAGE	**DATE / PIC**
Non-Reporting ltr (1st):	
Non-Reporting ltr (2nd):	
Non-Reporting ltr (Final):	
Notification ltr (if non-pickup):	
Call OI:	27/8/19
After call ltr to OI:	VIVIAN

Documentation Check List:	**Handler**	**Typist**
Notification ltr (if non-pickup)		
After call ltr to OI:	✓	
Authorisation To Act:	✓	
Release Voucher:	✓	
Final Repair Bill:	✓	
Car Rental Invoice:		
Towing Invoice		
LTA / GIA :	✓	
Medical Bill:		
PIR:		
Mandate/Reject Instruction:	✓	
LOD	✓	
Payment Breakdown Form:		
Post-Repair Photos:		
Others:		

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION	Date/Time:	Confirm with:	Confirm by:
Repair Cost: LG	S$ 1,000.00 (2 days) Reduction: 79 %		Email ☐ Call ☐
FINAL SETTLEMENT	Date/Time: 27/02/20	Confirm with WON ZHENG	Email ✓ Call ☐
Final Liability:	% 100 (Agreed / Assessed) BOLA S/N No. : 7		If NO or B 28, Ass. Lia :
Repair Cost: (w/GST)	S$ 1,070.00		(01 REAR-ENDED TP)
Loss of Rental (LOR):	S$ — (days)		
Loss of Use (LOU):	S$ 180.00 ($ 60 x 3 days)		
Loss of Income (LOI):	S$ — ($ x days)		
LOR only ☐ LOU only ✓	LOR + LOU ☐ LOR + LOI ☐ **[Tick only one]**		
GIA/LTA Search	S$ 2.00		
Medical:	S$ —		1) Claim status: Normal/Reject/Private Settle
Disbursement:	S$ —	(e.g. Tow/ Independent)	2) Report Format:
Legal Cost	S$ —		3) Survey fee: $ 350.00
Total:	S$ 1,252.00	**Global Sum S$:** 1,250.00	
FINAL PAYMENT	Date/Time:	Confirm with:	Email ☐ Call ☐
Payee 1:	S$ 1,250.00	Name 1: BH AUTO SERVICES PTE LTD	
Payee 2: (Strike if N.A.)	S$ —	Name 2: —	
Payee 3: (Strike if N.A.)	S$ —	Name 3: —	